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FACSIMILE COVER SHEET

TO: United States Patent and Trademark Office
Central Facsimile

FROM: Edward A. Kmetz, Reg. No. 42,746

RE: U.S. Patent Application No. 09/609,222
Group Art Unit: 2142; Examiner H. Le

FAX NO.: (571) 273-8300

DATE: August 19, 2005 **NO. OF PAGES:** 17
(including cover page)

TIME: 5:09 p.m. **SENT BY:** Chapise

MESSAGE

Transmitted herewith is an Amendment and an Amendment Transmittal in response to the Office Action dated May 19, 2005.

I hereby certify that this correspondence is being facsimile transmitted to:
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450
on

August 19, 2005
(Date of Transmission)

Edward A. Kmetz (Reg. No.: 42,746)
(Name of Attorney for Applicant)


Signature

August 19, 2005
Date of Signature

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AUG 19 2005

In re Application of:

Docket No. 03500.014602.

MASATO OCHIAI, et al.

Examiner: H. Le

Application No.: 09/609,222

Group Art Unit: 2142

Filed: June 30, 2000

Date: August 19, 2005

For: SYSTEM FOR SEARCHING FOR DEVICE ON NETWORK

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional claims fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 21	MINUS	** 26	= 0	x \$9 \$18	-0-
INDEP. CLAIMS	* 7	MINUS	*** 16	= 0	x \$43 \$86	-0-
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						-0-

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.☐ A check in the amount of \$_____ is enclosed.☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$____ to cover the fee for a ____ month extension is enclosed.
- ☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Edward A. Kmett
Attorney for Applicants
Registration No. 42,746

FITZPATRICK, CELLA, HARPER & SCINTO
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AUG 19 2005

03500.014602.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: H. Le
MASATO OCHIAI, et al.)
: Group Art Unit: 2142
Application No.: 09/609,222)
:
Filed: June 30, 2000)
:
For: SYSTEM FOR SEARCHING)
FOR DEVICE ON NETWORK : August 19, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated May 19, 2005, please amend the
above-identified application as follows:

I hereby certify that this correspondence is being facsimile transmitted to:
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on

August 19, 2005

(Date of Deposit)

Edward A. Kmett (Reg. No. 42,746)

(Name of Attorney for Applicant)


SignatureAugust 19, 2005

Date of Signature